



Client No. 2036		Client Name O. H. Metals				Location 1002 OSwego ST.				Date 2/11/87	
Facility Equipment ✓	Detect Clock ✓	Weapon No. —	Holster —	Nightstick —	Raincoat ✓	Flashlight ✓	Other 3 Keys, Log Book & Phone				
Officers: Fully explain all items marked "Yes" with time and all detail. For additional space use reverse side and attach incident reports.						Officer—Day Shift (Name) Kenneth Fralich		Officer—Swing Shift (Name) Robert Dealin		Officer—Grave Shift (Name) Dick Kokoszki	
Shift Began 8:00 AM Ended 4:00 PM						Shift Began 4:00 AM Ended 12:00 PM		Shift Began 12:00 AM Ended 8:00 AM			
Observations or actions taken						Yes		No		Explanation	
Rounds or stations missed											
Unlocked doors, gates or windows											
Unlocked vaults or safes											
Fire-smoke-or hazards											
1. Extinguishers missing or defective											
2. Sprinkler system defective											
3. Fire doors or exits blocked											
4. Rubbish accumulation											
5. Motors running											
6. Lights left burning											
Injury hazards											
Visitors											
Trespassing											
Violation of company rules											
Remarks At 3:30 U.P.D. reported to me that they had a complaint about someone painting walls on street and called CPT Miller at 2:50 to report same (R.P.)											
IMPORTANT: If you were ill or injured please explain on the reverse side of this form and call your supervisor before leaving this post.											
1. Were you injured during this tour?		Day Shift Yes No		1. Yes No		2. Yes No		3. Yes No		Swing Shift Yes No	
2. Did you suffer any illness?		Yes No		Yes No		Yes No		Yes No		Yes No	
3. Have you reported all accidents coming to your attention?		Yes No		Yes No		Yes No		Yes No		Yes No	
Signatures		1. Kenneth Fralich		2. Robert Dealin		3. Dick Kokoszki					
Signatures		2.		3.							
Signatures		3.									
439092											

Use this form to report any irregularities or out of the ordinary incident occurring during your tour.



CENTRON SECURITY SERVICES, INC.

Date of Report 4/17/87

time of Report 2/50

Client; O H Metals

Address: 1002 OSWEGO ST UTICA, N.Y.

Location of Incident Lenox Ave

-Incident Painting on walls

Date occurred 4/17/87

Time occurred

AM 8:15 - 9:30 PM

Details and circumstances of incident; WHO, WHAT, WHERE, WHEN, & HOW???

Reported to me AT 9:32pm by utica Police Dept. that they had a complaint that some one was painting on the walls, on lenox ave. Noted new red paint on wall also on Noyes st. it occurred some time between 8:45pm and 9:30pm this date 4/17/87

Signed- Robert Darling Rank Sgt.

Page 1 of 1

Use this form to report any irregularities or out of the ordinary incident occurring during your tour.



CENTRON SECURITY SERVICES, INC.

Date of Report 4/17/87

time of Report 12:10 AM.

Client; O H METALS.

Address: 1002 OSWEGO ST.

Location of Incident BOSSERT MANF. UTICA NY. 13502.

-Incident DEFECTIVE FLOOD LIGHT.

Date occurred 4/14/87.

Time occurred 12:30. AM

PM

Details and circumstances of incident; WHO, WHAT, WHERE, WHEN, & HOW???

ON 4/14/87 ONE FLOOD LIGHT WOULD NOT COME
ON. SWITCHED CIRCUIT BREAKER ON AND OEE TO
NO AVAIL. MUST BE DEFECTIVE LAMP.

Signed-

Dick Yokozaki

Rank

S. O.

Page

1 of 2